

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	Cll		09-12-01
O.I.P.E. CLASSIFIER			12-10-01
FORMALITY REVIEW	TG	JC 1113	8-23-01
RESPONSE FORMALITY REVIEW	TG	1127	01/04/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 . Restricted O Objected

Claim	Date
1	10/16/01
2	10/16/01
3	10/16/01
4	10/16/01
5	10/16/01
6	10/16/01
7	10/16/01
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9	10/16/01
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27	10/16/01
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30	10/16/01
31	10/16/01
32	NNNN
33	NNNN
34	NNNN
35	NNNN
36	NNNN
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47	NNNN
48	NNNN
49	NNNN
50	NNNN

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32	NNNN
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29	10/16/01
30	10/16/01
31	10/16/01
32	NNNN
33	NNNN
34	NNNN
35	NNNN
36	NNNN
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43	NNNN
44	NNNN
45	NNNN
46	NNNN
47	NNNN
48	NNNN
49	NNNN
50	NNNN

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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569
8/23/01
6/17/02
1-4-22